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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an a filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	First name F. Middle name Rojas-Alcocer Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2196	

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Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live		If Debtor 2 lives at a different address:
		1581 Cypress Avenue Hanover Park, IL 60133 Number, Street, City, State & ZIP Code Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
6.	Why you are choosing this district to file for bankruptcy	Number, P.O. Box, Street, City, State & ZIP Code Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Number, P.O. Box, Street, City, State & ZIP Code Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Jose F. Rojas-Alcocer

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	otor 1 Jose F. Rojas-Alc	ocer			Case number (if known)			
Par	t 2: Tell the Court About	our Bankruptcy C	ase					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	Chapter 7						
		☐ Chapter 11						
		☐ Chapter 12						
		☐ Chapter 13						
8.	How you will pay the fee	about how y	ou may pay. Typically, if you are ney is submitting your payment	e paying the fee you	k with the clerk's office in your local court for more details rself, you may pay with cash, cashier's check, or money orde attorney may pay with a credit card or check with a	r.		
			ay the fee in installments. If you have the fee in installments (Official Form 103		on, sign and attach the Application for Individuals to Pay The			
		☐ I request the not required your family s	nat my fee be waived (You ma I to, waive your fee, and may do	y request this option so only if your incor he fee in installment	on only if you are filing for Chapter 7. By law, a judge may, but me is less than 150% of the official poverty line that applies to its.). If you choose this option, you must fill out the <i>Application</i>			
		to nave the	Chapter 7 Filing Fee Walved (and the it with your petition.			
9.	Have you filed for bankruptcy within the last	■ No.						
	8 years?	☐ Yes.						
		Distric	t	When	Case number	_		
		Distric	t	When	Case number	_		
		Distric	t	When	Case number	_		
10.	Are any bankruptcy cases pending or being filed by	■ No						
	a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
		Debtor			Relationship to you			
		Distric	t	When	Case number, if known			
		Debtor			Relationship to you			
		Distric	t	When	Case number, if known	_		
11.		■ No. Go to	line 12.			_		
	residence?	☐ Yes. Has y	your landlord obtained an eviction	n judgment against	you and do you want to stay in your residence?			
			No. Go to line 12.					
			Yes. Fill out <i>Initial Statement</i> bankruptcy petition.	About an Eviction	Judgment Against You (Form 101A) and file it with this			

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Deb	otor 1 Jose F. Rojas-Alc	ocer		Case number (if known)		
Par	Report About Any Bus	sinesses	You Own as a Sole Propriet	or		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.			
	business:	☐ Yes.	Name and location of bus	iness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.		Number, Street, City, State	e & ZIP Code ex to describe your business:		
	to this petition.			ness (as defined in 11 U.S.C. § 101(27A))		
			_	Estate (as defined in 11 U.S.C. § 101(51B))		
			_ •	efined in 11 U.S.C. § 101(53A))		
				r (as defined in 11 U.S.C. § 101(6))		
			☐ None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).				
	For a definition of small	No.	I am not filing under Chap	ter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	Hazardous Property or Any	Property That Needs Immediate Attention		
14.	Do you own or have any property that poses or is	No.				
	alleged to pose a threat of imminent and identifiable hazard to public health or	☐ Yes.	What is the hazard?			
	safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	Number, Street, City, State & Zip Code		

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Deb	tor 1 Jose F. Rojas-Alc	ocer	•			Case number (if kno	wn)
Part	5: Explain Your Efforts to	o Red	ceive a Briefing Ab	out Credit Counseling			
		Abo	out Debtor 1:		Abo	ut Debtor 2 (Spous	se Only in a Joint Case):
15.	Tell the court whether you have received a briefing about credit counseling.	You	counseling agend	ng from an approved credit by within the 180 days before I otcy petition, and I received a pletion.	You ■	counseling agenc	ng from an approved credit y within the 180 days before I filed etition, and I received a certificate of
	The law requires that you receive a briefing about credit counseling before you						
file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file. If you file anyway, the court can dismiss your case, you will lose whatever filing fee	must truthfully check one of the following choices. If you cannot do so, you are not		counseling agend	cy within the 180 days before I stcy petition, but I do not have a		counseling agenc	y within the 180 days before I filed
	can begin collection		services from an unable to obtain t days after I made circumstances me	completion. Attach a copy of the certificate and the payment plan, you developed with the agency. a briefing from an approved credit g agency within the 180 days before I g agency within the 180 days before I counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a of completion. Attach a copy of the certificate and payment bankruptcy petition, but I do not have a certificate of completion. Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any. I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver ulrement. a 30-day temporary waiver of the tt, attach a separate sheet explaining what made to obtain the briefing, why you were obtain it before you filed for bankruptcy, and the circumstances required you to file this made to obtain the briefing, why you were obtain it before you filed for bankruptcy. Is satisfied with your reasons, you must a briefing within 30 days after you file. You must file a certificate from the approved agency, and what exigent circumstances required you to file this case. Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, u do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only not is limited to a maximum of 15 days. Equired to receive a briefing about credit counseling because of: I am not required to receive a briefing about credit counseling because of: I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions			
	can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. MUST file a copy of the certific man approved agency, but was unable to obtain the services during the 7 request, and exigent circum temporary waiter of the required you to file this cose. Your case may be dismissed if your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your receive a briefing within 30 days after you file. You must file a copy of the certific counseling man approved agency, but was unable to obtain the briefing, why vou were unable to obtain the briefing, why you were unable to obtain the briefing what a separate sheet explaining what required you to file file for bankruptcy. If the court is satisfied with your receive a briefing within 30 day a certificate from the approved agency, along with a copy of the payment plan you developed, if	heet explaining what efforts you made to why you were unable to obtain it before ptcy, and what exigent circumstances					
	If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. Certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, but was unable to obtain the briefing, why you were unable to obtain the briefing, why you were unable to obtain the briefing, why you were unable to obtain the briefing within 30 days after you file for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, but was unable to obtain the briefing, why you were unable to obtain the briefing within 30 days after you file obtain the briefing within 30 days after you file for bankruptcy. If the court is satisfied with your reasons, your case may be dismissed. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.		case. Your case may be	dismissed if the court is		your reasons for no	
		rithin 30 days after you file. You must file the approved agency, along with a copy of the developed, if any. If you do not do so,					
			dismissed.				
			for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about			•	
			☐ Incapacity.	mental deficiency that makes me incapable of realizing or		☐ Incapacity.	deficiency that makes me incapable of realizing or making rational decisions
			☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
			about credit counse	I am currently on active military duty in a military combat zone. are not required to receive a briefing eling, you must file a motion for unseling with the court.			I am currently on active military duty in a military combat zone. re not required to receive a briefing about ou must file a motion for waiver of credit court.

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Deb	otor 1 Jose F. Rojas-Ald	ocer		Case nur	mber (if known)		
Par	t 6: Answer These Questi	ons for Re	porting Purposes				
16.	What kind of debts do you have?	16a.		r consumer debts? Consumer debts are descended from the consumer debts are descended from the consumer debts are descended from the consumer debts."	efined in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.		business debts? Business debts are debort or through the operation of the business of			
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you	owe that are not consumer debts or busine	ss debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapt	ter 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
			■ No				
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes				
18.	How many Creditors do	1 -49		1 ,000-5,000	25,001-50,000		
	you estimate that you owe?	□ 50-99		5001-10,000	5 0,001-100,000		
		☐ 100-19 ☐ 200-99	· -	☐ 10,001-25,000	☐ More than100,000		
19.	How much do you	S \$0 - \$5	50.000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
19.	estimate your assets to be worth?		01 - \$100,000	☐ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion		
	50 1101111		001 - \$500,000	\$50,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion		
		□ \$500,0	001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion		
20.		\$0 - \$5	50.000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion		
			001 - \$500,000	\$50,000,001 - \$100 million	\$10,000,000,001 - \$50 billion		
		□ \$500,0	001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion		
Par	t 7: Sign Below						
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
				7, I am aware that I may proceed, if eligible available under each chapter, and I choose to	, under Chapter 7, 11,12, or 13 of title 11, United o proceed under Chapter 7.		
				I not pay or agree to pay someone who is no quired by 11 U.S.C. § 342(b).	t an attorney to help me fill out this document, I		
		I request	relief in accordance with the	e chapter of title 11, United States Code, spe	ecified in this petition.		
		case can			or property by fraud in connection with a bankrupto oth. 18 U.S.C. §§ 152, 1341, 1519, and 3571.		
		Jose F.	Rojas-Alcocer of Debtor 1	Signature of De	btor 2		
		Executed		Executed on			
			MM / DD / YYYY	_	MM / DD / YYYY		

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Debtor 1 Jose F. Rojas-Ald	cocer	Case	number (if known)
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.	I, the attorney for the debtor(s) named in this petition Chapter 7, 11, 12, or 13 of title 11, United States Coperson is eligible. I also certify that I have delivered which § 707(b)(4)(D) applies, certify that I have no k petition is incorrect.	de, and have explained the to the debtor(s) the notice	ne relief available under each chapter for which the e required by 11 U.S.C. § 342(b) and, in a case in
	/s/ Joseph P. Doyle	Date	January 29, 2016
	Signature of Attorney for Debtor		MM / DD / YYYY
	Joseph P. Doyle		
	Printed name		
	Law Office of Joseph P. Doyle LLC		
	Firm name		
	105 S. Roselle Road, Suite 203 Schaumburg, IL 60193		
	Number, Street, City, State & ZIP Code		
	Contact phone 847-985-1100	Email address	joe@fightbills.com
	6277393		
	Bar number & State		_

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Fill in this inforr	mation to identify your	case:		
Debtor 1	Jose F. Rojas-Al	cocer		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				☐ Check if this is an
				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Par	t 1: Summarize Your Assets		
		Your as	ssets what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	2,595.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	2,595.00
Par	t 2: Summarize Your Liabilities		
		Your lia Amount	abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	15,663.21
	Your total liabilities	\$	15,663.21
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,106.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,075.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your of	her schedul	es.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a p purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	ersonal, fam	ily, or household
	Vous dabts are not primarily consumer dabts. You have nothing to report on this part of the form. Check this ha	w and aubm	it this form to the

Official Form 106Sum

court with your other schedules.

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Debtor 1 Jose F. Rojas-Alcocer Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$	736.29

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill in this infor	mation to identify your	case and this filing:			
Debtor 1	Jose F. Rojas-A			_	
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing)	First Name	Middle Name	Last Name	_	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS	_	
Case number				_	Check if this is an
Case Harriser _					amended filing
Official Fo	rm 106A/B				
		oortv			4044
	le A/B: Pro		nce. If an asset fits in more than one categor	u liet the ecet in the	12/15
think it fits best. E	Be as complete and accur re space is needed, attacl	ate as possible. If two married	I people are filing together, both are equally in the top of any additional pages, write you	responsible for supply	ring correct
Part 1: Describe	Each Residence, Buildin	g, Land, or Other Real Estate	You Own or Have an Interest In		
1. Do vou own or	have any legal or equitab	le interest in any residence. b	uilding, land, or similar property?		
_		,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	anang, lana, e. ea. property.		
■ No. Go to Pa					
☐ Yes. Where	is the property?				
Part 2: Describe	Your Vehicles				
			cles, whether they are registered or not' G: Executory Contracts and Unexpired Lea		s you own that
3. Cars, vans, tr	ucks, tractors, sport u	tility vehicles, motorcycles	S		
■ No					
■ No □ Yes					
□ res					
			I vehicles, other vehicles, and accessor ls, snowmobiles, motorcycle accessories	ies	
■ No					
☐ Yes					
_					
	•	-	tries from Part 2, including any entries fo	or pages	\$0.00
.youo u	uoou .o u <u>u</u> o				 -
	Your Personal and Hous				
Do you own or	have any legal or equit	able interest in any of the	following items?	por Do	rent value of the tion you own? not deduct secured ms or exemptions.
	oods and furnishings ajor appliances, furniture	, linens, china, kitchenware		Cial	піз от ехетіршогіз.
Yes. Desc	eribe				
					* 400.00
	Miscella	neous used household	goods and furnishings		\$400.00
7. Electronics					
Examples: Te			equipment; computers, printers, scanners; r	music collections; elec	ctronic devices
in ■ No	cluding cell phones, cam	eras, media players, games			
■ NO					

☐ Yes. Describe.....

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Debtor 1	Jose F. Rojas-Alcocer	Case number (if known)	
	-		
	tibles of value ples: Antiques and figurines; paintings, prints, or other artwork;	books, pictures, or other art objects; stamp, coin, or	baseball card collections; other
	collections, memorabilia, collectibles		
□ No			
■ Yes	s. Describe		
	Books, Pictures, and CD's		\$100.00
	ment for sports and hobbies ples: Sports, photographic, exercise, and other hobby equipmer instruments	it; bicycles, pool tables, golf clubs, skis; canoes and	kayaks; carpentry tools; musical
■ No	s. Describe		
10. Firea	rms mples: Pistols, rifles, shotguns, ammunition, and related equipm	ent	
■ No	s. Describe		
11. Cloth			
□ No		es, accessories	
■ Yes	s. Describe		
	Wearing Apparel		\$900.00
□ No ■ Yes	s. Describe		
	Miscellaneous Costume Jewelry		\$200.00
	farm animals mples: Dogs, cats, birds, horses		
■ No	•		
	s. Describe		
1.1 Am.	ather personal and becombald items you did not already li		
I4. Any o	other personal and household items you did not already lis	st, including any nealth aids you did not list	
	s. Give specific information		
	d the dollar value of all of your entries from Part 3, includir t 3. Write that number here		\$1,600.00
David 1	Describe Very Fire with Assets		
	Describe Your Financial Assets own or have any legal or equitable interest in any of the fo	llowing?	Current value of the
	,	g .	portion you own? Do not deduct secured claims or exemptions.
16. Cash <i>Exai</i> □ No	mples: Money you have in your wallet, in your home, in a safe de	posit box, and on hand when you file your petition	
■ Yes	S		
		Cash on Hand	\$95.00
		Casii Cii Hallu	φ95.00

Official Form 106A/B Schedule A/B: Property

page 2

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De	ebtor 1 Jose F. Rojas-Alcocer		Case number (if known)
17.	institutions. If you have multiple	ncial accounts; certificates of deposit; shares in crede accounts with the same institution, list each.	it unions, brokerage houses, and other similar
	■ No □ Yes	Institution name:	
18.	■ No	stocks ts with brokerage firms, money market accounts n or issuer name:	
19.	joint venture	in incorporated and unincorporated businesses	including an interest in an LLC, partnership, and
	■ No □ Yes. Give specific information about ther Name of enti	ty:	% of ownership:
20.	Negotiable instruments include personal ch		•
21.	. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh No	, 401(k), 403(b), thrift savings accounts, or other per	sion or profit-sharing plans
	☐ Yes. List each account separately. Type of account	t: Institution name:	
22.		e made so that you may continue service or use from paid rent, public utilities (electric, gas, water), telecon	
	☐ Yes	Institution name or individual:	
23.	_ ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	nt of money to you, either for life or for a number of ye	ars)
	■ No □ Yes Issuer name and des	cription.	
24.	Interests in an education IRA, in an acco 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b ■ No	unt in a qualified ABLE program, or under a qual(1).	ified state tuition program.
		description. Separately file the records of any interes	ts.11 U.S.C. § 521(c):
25.	. Trusts, equitable or future interests in p	roperty (other than anything listed in line 1), and	rights or powers exercisable for your benefit
	☐ Yes. Give specific information about ther	n	
26.	 Patents, copyrights, trademarks, trade s Examples: Internet domain names, website No ☐ Yes. Give specific information about ther 	es, proceeds from royalties and licensing agreements	
27.	Licenses, franchises, and other general	intangibles uses, cooperative association holdings, liquor licenses	s, professional licenses
M	oney or property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 3

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D	Jose F. Rojas-Alcocer		Case number (if known)	
28	s. Tax refunds owed to you ☐ No			
	■ Yes. Give specific information about the	m, including whether you already filed the retur	ns and the tax years	
		Estimated 2015 tax refund of \$900.0 not been received	00 has	\$900.00
29	Family support Examples: Past due or lump sum alimony No ☐ Yes. Give specific information	, spousal support, child support, maintenance,	divorce settlement, property sett	lement
30	 Other amounts someone owes you Examples: Unpaid wages, disability insura unpaid loans you made to som No Yes. Give specific information 	ance payments, disability benefits, sick pay, va neone else	cation pay, workers' compensati	ion, Social Security benefits;
31	■ No	nce; health savings account (HSA); credit, hon	neowner's, or renter's insurance	
	Yes. Name the insurance company of ea	• •	Beneficiary:	Surrender or refund value:
32	Any interest in property that is due you lif you are the beneficiary of a living trust, e died. No Yes. Give specific information	I from someone who has died expect proceeds from a life insurance policy, or	rare currently entitled to receive p	property because someone has
33	 Claims against third parties, whether of Examples: Accidents, employment disputed No Yes. Describe each claim 	r not you have filed a lawsuit or made a de es, insurance claims, or rights to sue	mand for payment	
34	Other contingent and unliquidated claim No ☐ Yes. Describe each claim	ms of every nature, including counterclaim	s of the debtor and rights to s	set off claims
35	 Any financial assets you did not alread No Yes. Give specific information 	y list		
30		ries from Part 4, including any entries for p		\$995.00
P	art 5: Describe Any Business-Related Proper	ty You Own or Have an Interest In. List any real	estate in Part 1.	
	 Do you own or have any legal or equitable in No. Go to Part 6. Yes. Go to line 38. 	terest in any business-related property?		
P	art 6: Describe Any Farm- and Commercial F If you own or have an interest in farmland,	ishing-Related Property You Own or Have an In list it in Part 1.	terest In.	

 $46. \ \, \textbf{Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?}$

Schedule A/B: Property

No. Go to Part 7.

Official Form 106A/B

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Deb	otor 1	Jose F. Rojas-Alcocer		Case number (if known)	
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That Y	ou Did Not List Above		
53. I		have other property of any kind you did not already lis les: Season tickets, country club membership	t?		
	No				
	Yes. 0	Give specific information			
54.	Add th	he dollar value of all of your entries from Part 7. Write t	nat number here		\$0.00
·				_	ΨΟ.ΟΟ
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$0.00
56.	Part 2	: Total vehicles, line 5	\$0.00		
57.	Part 3	: Total personal and household items, line 15	\$1,600.00		
58.	Part 4	: Total financial assets, line 36	\$995.00		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54	+\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$2,595.00	Copy personal property total	\$2,595.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$2,595.00

Official Form 106A/B

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Fill in this inform	Fill in this information to identify your case:					
Debtor 1 Jose F. Rojas-Alcocer						
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS			
Case number						
(if known)					☐ Check if this is an amended filing	

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
\$400.00		\$400.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$100.00		\$100.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$900.00		\$900.00	735 ILCS 5/12-1001(a)
		100% of fair market value, up to any applicable statutory limit	
\$200.00		\$200.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$95.00		\$95.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
	\$400.00 \$900.00 \$200.00	\$100.00 \$900.00 \$\$95.00 \$\$95.00	Schedule A/B \$400.00 \$400.00 \$400.00 \$100% of fair market value, up to any applicable statutory limit \$900.00 \$200.00 \$100% of fair market value, up to any applicable statutory limit \$200.00 \$200.00 \$200.00 \$95.00 \$95.00 \$95.00 \$100% of fair market value, up to any applicable statutory limit

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De	otor 1 Jose F. Rojas-Alcocer	Case number (if known)				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Check only one box for each exemption.			
	Estimated 2015 tax refund of \$900.00 has not been received	\$900.00	\$900.00	735 ILCS 5/12-1001(b)		
	Line from Schedule A/B: 28.1	100% of fair market value, up to any applicable statutory limit				
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/16 and every 3 years)					
	NoYes. Did you acquire the property covered b	ov the evernation within	1 215 days before you filed this case?			
	□ No	by the exemption within	1,213 days before you filed this case:			
	☐ Yes					

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Fill in this infor	mation to identify your	case:		
Debtor 1	Jose F. Rojas-A	lcocer		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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Fill in th	is informatio	on to identify your ca	se:					
Debtor 1	_	lose F. Rojas-Alco	ocer					
		irst Name	Middle Na	ame	Last Name		_	
Debtor 2							_	
(Spouse if,	filing) F	irst Name	Middle Na	ame	Last Name			
United S	states Bankrup	otcy Court for the:	NORTHERN	N DISTRICT OF I	LLINOIS		_	
Cooperation	mh a r							
(if known)	er			_			пс	heck if this is an
								mended filing
	al Form 1							
Sched	dule E/F:	Creditors Wh	no Have	Unsecured	d Claims			12/15
Schedule D: Credito the Contil	G: Executory ors Who Have nuation Page t ber (if known)	Contracts and Unexpire Claims Secured by Proposition of this page. If you have	ed Leases (Off perty. If more no informati	ficial Form 106G). space is needed, o on to report in a Pa	Do not include a copy the Part yo		ally secured claims t er the entries in the	hat are listed in Schedule boxes on the left. Attach
		ave priority unsecured						
_	o. Go to Part 2.	-						
Part 2:	_	Your NONPRIORITY	Unsecured (Claims				
		ave nonpriority unsecu						
_	•		_	•		dulaa		
_ IN	o. You have no	thing to report in this part	i. Submit this id	orm to the court with	i your other sche	dules.		
Y	es.							
unse	cured claim, lis	t the creditor separately f	for each claim.	For each claim liste	ed, identify what t	holds each claim. If a catype of claim it is. Do not three nonpriority unsecur	list claims already inc	
								Total claim
4.1	ABBHH Ou	t-Patient Group		Last 4 digits of ac	count number	9357		\$44.21
	Nonpriority Cre			When wee the del	h4 ima	0045		
	1786 Moon Hoffman F	states, IL 60169		When was the del	ot incurred?	2015		-
		City State Zlp Code		As of the date you	ı file, the claim i	s: Check all that apply		
	Who incurred	the debt? Check one.						
	Debtor 1 on	ly		☐ Contingent				
	Debtor 2 on	ly		☐ Unliquidated				
	Debtor 1 an	d Debtor 2 only		☐ Disputed				
	☐ At least one	of the debtors and anoth	ner	Type of NONPRIO	RITY unsecured	d claim:		
	☐ Check if th	is claim is for a commu	unity	☐ Student loans				
	debt Is the claim su	bject to offset?		Obligations aris		ration agreement or divo	rce that you did not	
	No			Debts to pension	on or profit-sharin	g plans, and other simila	r debts	
	☐ Yes			Other. Specify	Medical			-

Official Form 106 E/F

Best Case Bankruptcy

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Debto	Jose F. Rojas-Alcocer		Case number (if know)			
4.2	Advanced Psych Services Nonpriority Creditor's Name PO Box 5800 River Forest, IL 60305-5800 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim i	9231 2016 s: Check all that apply	\$49.00		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed				
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured Student loans				
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Medical				
4.3	Alexian Brothers Behavioral Health Nonpriority Creditor's Name	Last 4 digits of account number	2196	\$45.00		
	21272 Network Place Chicago, IL 60673	When was the debt incurred?	2015			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:			
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify Medical				
4.4	Alliance Laboratory Physicians Nonpriority Creditor's Name	Last 4 digits of account number	8401	\$262.00		
	PO Box 5968 Carol Stream, IL 60197	When was the debt incurred?	2015			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:			
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	Is the claim subject to offset?					
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify Medical				

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Debtor	1 Jose F. Rojas-Alcocer		Case number (if know)	
4.5	Allied Interstate, LLC Nonpriority Creditor's Name	Last 4 digits of account number	7281	\$0.00
	7525 W. Campus Rd. New Albany, OH 43054	When was the debt incurred?	2015	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	a plane, and other similar debte	
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Notice only	Collection Chase	
4.6	Arlington Ridge Pathology, S.C.	Last 4 digits of account number	L094	\$11.00
	Nonpriority Creditor's Name 520 East 22nd Street	When was the debt incurred?	2015	
	Number Street City State Zlp Code	As of the date you file, the claim i	e. Chock all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim i		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes		g prane, and care, emma, depic	
	— 163	Other. Specify Medical		
4.7	Associates In Psychiatry Counseling	Last 4 digits of account number	2196	\$100.00
	Nonpriority Creditor's Name	- NAME on wood the debt in a ward?	2015	
	2050 Lakin Ave 202	When was the debt incurred?	2015	
	Elgin, IL 60123			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Medical		
		Unier. Specify		

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Debto	Jose F. Rojas-Alcocer					
4.8	CEP America-Illinois Nonpriority Creditor's Name	Last 4 digits of account number	1001	\$267.00		
	PO Box 582663	When was the debt incurred?	2015			
	Modesto, CA 95358 Number Street City State Zlp Code	As of the date you file, the claim i	e. Chock all that apply			
	Who incurred the debt? Check one.	As of the date you me, the claim	S. Oneok all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Medical				
4.9	Chase Card	Last 4 digits of account number	7281	\$2,866.00		
	Nonpriority Creditor's Name		Opened 4/21/15 Last Active			
	Po Box 15298	When was the debt incurred?	7/01/15			
	Wilmington, DE 19850 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.		or o			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans				
	☐ Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another					
	☐ Check if this claim is for a community					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Credit Card	her. Specify Credit Card			
4.10	Chase Card	Last 4 digits of account number	8510	\$1,349.00		
	Nonpriority Creditor's Name	_				
	Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 11/27/07 Last Active 12/17/15			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
	□ Yes		S			
	— 163	Other. Specify				

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Debtor	Jose F. Rojas-Alcocer		Case number (if know)			
4.11	Diversified Collection Services Nonpriority Creditor's Name	Last 4 digits of account number	2196	\$0.00		
	333 N Canyons Parkway Suite 100 Livermore, CA 94551 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim i	2015 s: Check all that apply			
	Who incurred the debt? Check one.	_				
	Debtor 1 only	Contingent				
	Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured	i claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin				
	Yes	Other. Specify Notice only	<u> </u>	-		
4.12	Gc Services	Last 4 digits of account number	3363	\$386.00		
	Nonpriority Creditor's Name 6330 Gulfton Houston, TX 77081	When was the debt incurred?	Opened 6/30/15			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	■ Debtor 1 only					
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharin	a plans, and other similar debts			
	Yes	·				
	i res	Other. Specify Collection	т эргин	-		
4.13	Health PCP Inc Nonpriority Creditor's Name	Last 4 digits of account number	2196	\$100.00		
	18440 Thompson Ct # 105 Tinley Park, IL 60477	When was the debt incurred?	2015	-		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	ly Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	y pians, and other similar debts			
	☐ Yes	Other. Specify Medical		-		

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Debto	Jose F. Rojas-Alcocer		Case number (if know)		
4.14	Hospital Med Consult Nonpriority Creditor's Name PO Box 967	Last 4 digits of account number When was the debt incurred?	<u>3616</u>	\$440.00	
	Tinley Park, IL 60477-0967 Number Street City State Zlp Code	As of the date you file, the claim			
	Who incurred the debt? Check one.	As of the date you file, the claim	S. Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	☐ Yes	Other. Specify Medical			
4.15	Hospital Med Consult	Last 4 digits of account number	3317	\$39.00	
	Nonpriority Creditor's Name PO box 967	When was the debt incurred?	2015		
	Tinley Park, IL 60477-0967	mon was the dest mountain.	2013		
	Number Street City State Zlp Code	s: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only				
	At least one of the debtors and another	_	Type of NONPRIORITY unsecured claim: Student loans		
	Check if this claim is for a community	_			
	debt Is the claim subject to offset?	 Obligations arising out of a separeport as priority claims 	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharin	a plane, and other similar debts		
	☐ Yes	Other. Specify Medical	g pians, and other similar debts		
		· · · · · · · · · · · · · · · · · · ·		• • • • • • • • • • • • • • • • • • • •	
4.16	Hospital Med Consult Nonpriority Creditor's Name	Last 4 digits of account number	3317	\$39.00	
	PO box 967 Tinley Park, IL 60477-0967	When was the debt incurred?	2015		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only				
	☐ Debtor 1 and Debtor 2 only				
	☐ At least one of the debtors and another	d claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a sepa			
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte		
	■ No	·	g pians, and other similal debts		
	Yes	Other. Specify Medical	_		

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Debto	Jose F. Rojas-Alcocer	Case number (if know)				
4.17	Medical Recovery Specialists Nonpriority Creditor's Name	Last 4 digits of account number	9140	\$79.00		
	2250 E Devon Ave Suite 352 Des Plaines, IL 60018	When was the debt incurred?	2015			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify Medical				
4.18	Midwest Emergency Associates Nonpriority Creditor's Name	Last 4 digits of account number	8015	\$958.00		
	3429 Regal Drive Alcoa, TN 37701-3265	When was the debt incurred?	2015			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans				
	☐ Check if this claim is for a community					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Medical				
4.19	Mrsi Nonpriority Creditor's Name	Last 4 digits of account number	3694	\$976.00		
	2250 E Devon Ave Ste 352 Des Plaines, IL 60018	When was the debt incurred?	Opened 7/09/15			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another					
	☐ Check if this claim is for a community					
	debt	Obligations arising out of a sepa				
	Is the claim subject to offset?	report as priority claims				
	■ No	☐ Debts to pension or profit-sharin				
	Yes	Other. Specify Collection	Attorney Superior Air-Ground			

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Debto	Jose F. Rojas-Alcocer		Case number (if know)			
4.20	Mrsi Nonpriority Creditor's Name	Last 4 digits of account number	3695	\$976.00		
	2250 E Devon Ave Ste 352 Des Plaines, IL 60018	When was the debt incurred?	Opened 7/09/15			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify Collection	Attorney Superior Air-Ground			
4.21	NCI	Last 4 digits of account number	8163	\$133.00		
	Nonpriority Creditor's Name 3601 Algonquin Road	When was the debt incurred?	2015			
	Suite 232 Rolling Meadows, IL 60008 Number Street City State Zlp Code	As of the date you file, the claim i				
	Who incurred the debt? Check one.	As of the date you file, the claim i	5. Спеск ан тат арргу			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:			
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Medical				
4.22	Northwest Collectors	Last 4 digits of account number	8163	\$132.00		
	Nonpriority Creditor's Name 3601 Algonquin Rd Suite 500	When was the debt incurred?	Opened 11/01/15 Last Active 6/01/15			
	Rolling Meadows, IL 60008-3146 Number Street City State Zlp Code	As of the date you file, the claim i	a. Check all that apply			
	Who incurred the debt? Check one.	As of the date you file, the claim i	s: Спеск ан тпат арріу			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only					
	\square At least one of the debtors and another	I claim:				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing				
	Yes	Other. Specify Collection	Village Of Hano			
			-			

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Debtor	1 Jose F. Rojas-Alcocer		Case number (if know)	
4.23	Northwest Collectors Nonpriority Creditor's Name	Last 4 digits of account number	8224	\$135.00
	3601 Algonquin Rd Suite 500 Rolling Meadows, IL 60008-3146	When was the debt incurred?	Opened 11/01/15 Last Active 6/01/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Collection		
		- Other. Specify		
4.24	Northwest Community Hospital Nonpriority Creditor's Name	Last 4 digits of account number	4458	\$2,773.00
	25709 Network Pl.	When was the debt incurred?	2015	
	Chicago, IL 60673 Number Street City State Zlp Code	As of the date you file, the claim i	e. Chock all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim i	3. Oneon all triat apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	_	report as priority claims	a plane, and other similar debts	
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Medical		
4.25	Northwest Radiology Associates, SC	Last 4 digits of account number	9005	\$77.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 520 E. 22nd St.	When was the debt incurred?	2015	
	Lombard, IL 60148			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	1 claim:	
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	ı Ciaiii.	
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	·	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Medical		

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Debtor	1 Jose F. Rojas-Alcocer		Case number (if know)			
4.26	Paypal Credit Nonpriority Creditor's Name	Last 4 digits of account number	8007	\$2,908.00		
	PO Box 5138	When was the debt incurred?	2015			
	Timonium, MD 21094 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	_	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	Other. Specify				
4.27	Sprint/Bankruptcy	Last 4 digits of account number	3363	\$386.00		
	Nonpriority Creditor's Name PO Box 7949	When was the debt incurred?	2014			
	Overland Park, KS 66207-0949					
	Number Street City State Zlp Code As of the date you file, the claim		is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:				
	☐ Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another					
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts			
	Yes	Other. Specify				
4.28	Village of Hanover Park	Last 4 digits of account number	4469	\$133.00		
	Nonpriority Creditor's Name	<u>-</u>				
	PO Box 457 Wheeling, IL 60090	When was the debt incurred?	2015			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	Other. Specify Medical				
Dort 2.	List Others to De Notified About a Debt	That Van Almada I lated				

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address -NONE-

On which entry in Part 1 or Part 2 did you list the original creditor?

Line of (Check one):

Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecur

Last 4 digits of account number

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Debtor 1	Jose F. Rojas-Alcocer	Case number (if know)	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total cl	aim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.	Total Claim	0.00
Total claims	OI.	Student loans	OI.	Φ	0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	15,663.21
	6j.	Total. Add lines 6f through 6i.	6j.	\$	15,663.21

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Fill in this infor	mation to identify your	case:		
Debtor 1	Jose F. Rojas-Al	cocer		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is a
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

n				Otata what the contract on large to fee
Person or	Name, Number,	Street, City, State and ZIP	Code	State what the contract or lease is for
Name				
Number	Street			
City		State	ZIP Code	
Name				
Number	Street			
City		State	ZIP Code	<u> </u>
0.1.9		<u> </u>		
Name				
Number	Street			
City		State	ZIP Code	_
Name				
Number	Street			
City		State	ZIP Code	_
Name				
Number	Street			
Citv		State	ZIP Code	<u> </u>
	Name Number City Name Number City Name Number City Name Number City Name	Name, Number, Name Number Street City Name Number Street	Name, Number, Street, City, State and ZIP Name Number Street City State Name Number Street Name Number Street City State	Number Street City State ZIP Code Name Number Street City State ZIP Code

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		Boodinone	i ago oo oi o		
Fill in this	s information to identify yo	ur case:			
Debtor 1	Jose F. Rojas-	Alcocer			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the	NORTHERN DISTRICT	OF ILLINOIS		
Case num	ber				
(if known)				☐ Check if this is ar amended filing	1
	ıl Form 106H dule H: Your Co	dehtors		1	2/15
Scried	ule n. Toul Co	uebioi s		1	2/15
case numb	ber (if known). Answer eve			e. On the top of any Additional Pages, write your na	aine and
■ No					
□ 163	5				
		you lived in a community pro la, New Mexico, Puerto Rico, T		y? (Community property states and territories include wisconsin.)	Arizona,
■ No	. Go to line 3.				
		oouse, or legal equivalent live w	ith you at the time?		
	,		,		
line 2	again as a codebtor only i , Schedule E/F (Official Fo	f that person is a guarantor	or cosigner. Make sur	if your spouse is filing with you. List the person she you have listed the creditor on Schedule D (Offic se Schedule D, Schedule E/F, or Schedule G to fill	ial Form
	Column 1: Your codebtor Name, Number, Street, City, State a	nd ZIP Code		Column 2: The creditor to whom you owe the Check all schedules that apply:	debt
3.1				☐ Schedule D, line	
[0.1]	Name			Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
_ 	Name			Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street City	State	ZIP Code	_	
	Ony	State	ZIF COUG		

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Fill	in this information to identify your case	e:							
Del	otor 1 Jose F. Roja	s-Alcocer							
	otor 2 uuse, if filing)								
Uni	ted States Bankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		_				
	se number 					Check if this is: An amende A supplement income as of	d filing ent showin		chapter 13
0	fficial Form 106I					MM / DD/ Y	YYY		
S	chedule I: Your Inco	me							12/15
sup spo	es complete and accurate as possil plying correct information. If you a use. If you are separated and your ch a separate sheet to this form. O 1: Describe Employment	re married and not filing spouse is not filing with	g jointly, and your spo n you, do not include	ouse is inform	livir ation	g with you, included about your spou	de inform se. If mo	ation about y	your eeded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-f	filing spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed			☐ Emplo	☐ Employed		
		Zimproyimoni otatao	□ Not employed □ Not			☐ Not e	employed		
		Occupation	Server assistant	Server assistant					
	Include part-time, seasonal, or self-employed work.	Employer's name	Incontro A Tavola						
	Occupation may include student or homemaker, if it applies.	Employer's address	100 West Higgins Road Barrington, IL 60010						
		How long employed th	ere? 2 month	s					
Par	t 2: Give Details About Mont	thly Income							
	mate monthly income as of the dat ss you are separated.	te you file this form. If yo	ou have nothing to repor	t for an	ıy line	, write \$0 in the spa	ace. Includ	de your non-fil	ling spouse
	u or your non-filing spouse have more ce, attach a separate sheet to this forn		ine the information for a	all empl	oyers	for that person on	the lines b	oelow. If you n	eed more
						For Debtor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, salary deductions). If not paid monthly, ca	, and commissions (before local details and commissions) and commissions (before the monthly well as the m	ore all payroll vage would be.	2.	\$	1,452.00	\$	N/A	<u>. </u>
3.	Estimate and list monthly overting	ne pay.		3.	+\$	0.00	+\$	N/A	<u> </u>
4.	Calculate gross Income. Add line	2 + line 3.		4.	\$	1,452.00	\$	N/A	
					,				_

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Debt	or 1	Jose F. Rojas-Alcocer		Case	e number (if known)			
				Fo	r Debtor 1	For Deb	tor 2 or	
	C	ur line 4 have	4	•	4 450 00	non-filir	ng spouse	
	Cop	by line 4 here	4.	\$_	1,452.00	Φ	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	. \$	346.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	. \$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	. \$	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.		0.00	\$	N/A	
	5e.	Insurance	5e.	. –	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	: -	0.00	\$	N/A	
	5g.	Union dues	5g.		0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.	.+ \$_	0.00	+ \$	N/A	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	346.00	\$	N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	1,106.00	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	. \$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	. –	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	. \$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	. \$_	0.00	\$	N/A	
	8e.	Social Security	8e.	. \$_	0.00	\$	N/A	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g.		0.00	\$	N/A N/A	
	8h.	Other monthly income. Specify:	8h.	·	0.00	· · <u> </u>	N/A	
	0		—		0.00			1
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10.	\$	1,106.00 + \$_	N	/A = \$	1,106.00
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your dear friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not averify:	epende			Schedule .	<i>I.</i> 1. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certain					Combine	
13.	Do y ■	you expect an increase or decrease within the year after you file this form' No. Yes. Explain:	?				monthly	income

Fill	in this information to identify your case:						
Deb	tor 1 Jose F. Rojas-Alcocer		Check if this is:				
Deb	tor 2		_	n amended filing	ng postpetition chapter 13		
	buse, if filing)			xpenses as of the f			
Unit	ed States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINO	ois	N	MM / DD / YYYY			
Cas	e number						
(If kı	nown)						
	ficial Form 400 l						
	fficial Form 106J						
	chedule J: Your Expenses as complete and accurate as possible. If two married people are f	iling together, both :	are equally	responsible for s	12/15		
info	prmation. If more space is needed, attach another sheet to this for known). Answer every question.						
Par							
1.	Is this a joint case? No. Go to line 2.						
	Yes. Does Debtor 2 live in a separate household?						
	□ No						
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for	or Separate Househol	d of Debtor 2	2.			
2.	Do you have dependents? ■ No						
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?		
	Do not state the				□ No		
	dependents names.				☐ Yes ☐ No		
					☐ Yes		
					□ No		
					☐ Yes ☐ No		
					☐ No ☐ Yes		
3.	Do your expenses include ■ No				- 100		
	expenses of people other than yourself and your dependents?						
Par							
Est	imate your expenses as of your bankruptcy filing date unless you enses as of a date after the bankruptcy is filed. If this is a supple	u are using this form mental <i>Schedule J</i> , c	as a suppl check the b	ement in a Chapto ox at the top of th	er 13 case to report e form and fill in the		
• • •	licable date.						
	lude expenses paid for with non-cash government assistance if you of such assistance and have included it on Schedule I: Your In						
(Of	ficial Form 106l.)			Your expe	nses		
4.	The rental or home ownership expenses for your residence. Including payments and any rent for the ground or lot.	lude first mortgage	4. \$		0.00		
	If not included in line 4:						
	4a. Real estate taxes		4a. \$		0.00		
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00		
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00		
5.	 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as home 	equity loans	4d. \$ 5. \$		0.00 0.00		
J.	Additional mortgage payments for your residence, such as none	oquity loans	υ. φ		0.00		

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Debtor 1	Jose F. Rojas-Alcocer	Case num	nber (if known)	
6. Utili t	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	0.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
6d.	Other. Specify:	6d.	\$	0.00
7. Foo	d and housekeeping supplies		\$	250.00
B. Chile	dcare and children's education costs	8.	\$	0.00
O. Clot	hing, laundry, and dry cleaning	9.	\$	135.00
0. Pers	sonal care products and services	10.	\$	110.00
1. Med	ical and dental expenses	11.	\$	95.00
	nsportation. Include gas, maintenance, bus or train fare.			
	ot include car payments.	12.	\$	150.00
3. Ente	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
4. Chai	ritable contributions and religious donations	14.	\$	0.00
5. Insu	rance.			
	ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	· ·	0.00
15b.	Health insurance	15b.	·	235.00
15c.	Vehicle insurance	15c.	\$	0.00
15d.	Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spec		16.	\$	0.00
	allment or lease payments:	47-	¢.	0.00
	Car payments for Vehicle 1	17a.	· -	0.00
	Car payments for Vehicle 2	17b.	·	0.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.	\$	
Spec	er payments you make to support others who do not live with you.	19.	Ψ	0.00
	er real property expenses not included in lines 4 or 5 of this form or on Sche		ır İncome	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	· ·	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	Maintenance, repair, and upkeep expenses	20d.	· ·	0.00
	Homeowner's association or condominium dues	20d. 20e.	· ·	
			·	0.00
T. Otne	er: Specify:	21.	+\$	0.00
2. Calc	culate your monthly expenses			
22a.	Add lines 4 through 21.		\$	1,075.00
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	Add line 22a and 22b. The result is your monthly expenses.		\$	1,075.00
			Ť	1,01010
	culate your monthly net income.		•	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	1,106.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	1,075.00
220	Subtract your monthly expanded from your monthly income			
23C.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	31.00
	The result is your <i>monthly het income.</i>	200.		
For e	rou expect an increase or decrease in your expenses within the year after yo example, do you expect to finish paying for your car loan within the year or do you expect your fication to the terms of your mortgage?			r decrease because of a
■ N				
1 I Y	AS TEXTIMINATED			

— 110.	
☐ Yes.	Explain here:

Fill in this infor	mation to identify your	case:			
Debtor 1	Jose F. Rojas-Al				
Debtor 2 (Spouse if, filing)	First Name	Middle Name Middle Name	Last Name Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT C	F ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official Ford		an Individual I	Debtor's Scl	hedules	12/15
If two married no	eonle are filing together	, both are equally responsil	hle for supplying correc	t information	
obtaining money years, or both. 1		n connection with a bankrup			ent, concealing property, or or imprisonment for up to 20
Did you pa	ay or agree to pay some	one who is NOT an attorney	y to help you fill out ban	kruptcy forms?	
■ No					
Yes. I	Name of person				uptcy Petition Preparer's Notice, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the summa	ry and schedules filed w	vith this declaration a	and
X /s/ Jos	se F. Rojas-Alcocer		х		
Jose F	F. Rojas-Alcocer ire of Debtor 1		Signature of D	ebtor 2	
Date	January 29, 2016		Date		

Fill	l in this inform	ation to identify you	case:			
De	btor 1	Jose F. Rojas-A				
De	btor 2	First Name	Middle Name	Last Name		
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bank	cruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
	se number nown)					Check if this is an amended filing
	fficial For		Affairs for Indivi	duals Filing for B	ankruptcy	12/15
info	rmation. If mo				qually responsible for supp additional pages, write you	
Pa	rt 1: Give De	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	current marital statu	s?			
	☐ Married					
	■ Not marri	ed				
2.	During the las	st 3 years, have you	lived anywhere other than v	where you live now?		
	■ No □ Yes. List	all of the places you liv	ved in the last 3 years. Do not	include where you live now.		
	Debtor 1 Price	or Address:	Dates Debtor 1 there	lived Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there
3. stat					ty property state or territory Texas, Washington and Wisc	
	■ No					
	☐ Yes. Mak	e sure you fill out Sch	edule H: Your Codebtors (Off	icial Form 106H).		
Pa	rt 2 Explain	the Sources of You	r Income			
4.	Fill in the total	amount of income you	received from all jobs and all	g a business during this ye businesses, including part-tim ogether, list it only once under		dar years?
	□ No ■ Yes. Fill i	n the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until for bankruptcy:	■ Wages, commissions, bonuses, tips	\$1,320.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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De	ebtor 1 Jo	se F. Roja	as-Alcocer	'		Cas	se number (if known)		
				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	(befo	s income re deductions and sions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	r last calen anuary 1 to	dar year: December	31, 2015)	■ Wages, commissions, bonuses, tips		\$4,174.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business			☐ Operating a	ousiness	
		dar year be December		■ Wages, commissions, bonuses, tips		\$20,421.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business			☐ Operating a	ousiness	
5.	Include incother publication you are filibilities that each see the see that the se	come regard ic benefit par ng a joint ca	less of wheth yments; pens se and you h	e during this year or the tweer that income is taxable. Exicons; rental income; interest; ave income that you received ome from each source separate	amples of o dividends; together, lis	ther income are alim money collected from st it only once under	n lawsuits; royalties; Debtor 1.		
				Dahtan 4			Dahtan 0		
				Debtor 1 Sources of income Describe below	(befo	s income re deductions and sions)	Debtor 2 Sources of inc Describe below.		Gross income (before deductions and exclusions)
6.	·			Made Before You Filed fo 's debts primarily consum	•	tcy			
	□ No.	Neither De	ebtor 1 nor l	Debtor 2 has primarily conspersonal, family, or househo	sumer deb		are defined in 11 U	.S.C. § 101	(8) as "incurred by an
		During the	90 days before Go to line	ore you filed for bankruptcy, o	lid you pay	any creditor a total of	\$6,225* or more?		
		☐ Yes	creditor. D	each creditor to whom you pa o not include payments for do to an attorney for this bankru	omestic sup	\$6,225* or more in opport obligations, suc	one or more payme h as child support a	nts and the t and alimony.	total amount you paid that Also, do not include
		* Subject		t on 4/01/16 and every 3 year		for cases filed on or	after the date of ad	justment.	
	Yes.			or both have primarily consore you filed for bankruptcy, of			\$600 or more?		
		No.	Go to line	7.					
		□ _{Yes}		each creditor to whom you pa for domestic support obligation uptcy case.					
	Creditor	s Name and	d Address	Dates of payr	ment	Total amount paid	Amount you still owe	Was this	payment for
7.	Insiders in which you business y	clude your ro are an office ou operate a	elatives; any er, director, p	r bankruptcy, did you make general partners; relatives of erson in control, or owner of 2 prietor. 11 U.S.C. § 101. Inclusion	any general 20% or mor	nt on a debt you ow partners; partnershi e of their voting secu	ps of which you are rities; and any man	a general paging agent,	partner; corporations of , including one for a
		Name and		Dates of payı	ment	Total amount	Amount you	Reason f	or this payment
						paid	still owe		
8.	Within 1 y	ear before	you filed fo	r bankruptcy, did you mak	e any payn	nents or transfer ar	ny property on acc	count of a	debt that benefited an

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Del	otor 1	Jose F. Rojas-Alcocer		Cas	e number (if known)		
	inside Includ	er? de payments on debts guaranteed or cosigno	ed by an insider.				
	_	No Yes. List all payments to an insider					
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Pai	t 4:	Identify Legal Actions, Repossessions,	and Foreclosures				
9.	List al	n 1 year before you filed for bankruptcy Il such matters, including personal injury cas ontract disputes.					
	_	No Yes. Fill in the details.					
		e title e number	Nature of the case	Court or agency		Status of th	e case
10.	Withi Check	n 1 year before you filed for bankruptcy k all that apply and fill in the details below. No Yes. Fill in the information below.	, was any of your proper	ty repossessed, for	reclosed, garnish	ned, attached,	seized, or levied?
		ditor Name and Address	Describe the Property		Date		Value of the
			Explain what happened				property
11.	acco	n 90 days before you filed for bankrupto unts or refuse to make a payment becau No Yes. Fill in the details.		iding a bank or fina	ncial institution,	set off any am	nounts from your
	Cred	litor Name and Address	Describe the action the	creditor took	Date takei	action was	Amount
12.		n 1 year before you filed for bankruptcy -appointed receiver, a custodian, or ano		ty in the possessio	n of an assignee	for the benefi	t of creditors, a
		No					
	□ '	Yes					
Pai	t 5:	List Certain Gifts and Contributions					
13.		n 2 years before you filed for bankruptc	y, did you give any gifts	with a total value o	f more than \$600	per person?	
		Yes. Fill in the details for each gift. s with a total value of more than \$600 pe on	r Describe the gifts		Date the g	s you gave	Value
	Pers	on to Whom You Gave the Gift and ress:					
14.	_	n 2 years before you filed for bankruptc No	y, did you give any gifts	or contributions wi	th a total value o	of more than \$6	600 to any charity
		Yes. Fill in the details for each gift or contrib					
	more Chai	s or contributions to charities that total e than \$600 rity's Name ress (Number, Street, City, State and ZIP Code)	Describe what you	contributed		s you ributed	Value

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Del	Jose F. Rojas-Alcocer	Case	e number (if known)	
Par	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankru or gambling?	ptcy or since you filed for bankruptcy, did you k	ose anything because of theft,	fire, other disaster,
	■ No □ Yes. Fill in the details.			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pe insurance claims on line 33 of <i>Schedule A/B: Propi</i>	3	Value of property lost
Par	rt 7: List Certain Payments or Transfers	s		
16.	consulted about seeking bankruptcy or place any attorneys, bankruptcy petition pre	uptcy, did you or anyone else acting on your behi preparing a bankruptcy petition? eparers, or credit counseling agencies for services re		y to anyone you
	NoYes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Law Offices of Joseph P. Doyle 105 S. Roselle Rd. Suite 203 Schaumburg, IL 60193	\$950.00	2016	\$0.00
17.		uptcy, did you or anyone else acting on your behi ditors or to make payments to your creditors? you listed on line 16.	alf pay or transfer any propert	y to anyone who
	■ No			
	☐ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
18.	transferred in the ordinary course of you	made as security (such as the granting of a security		
	Person Who Received Transfer Address	property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
	Person's relationship to you			
19.	beneficiary? (These are often called asset-	cruptcy, did you transfer any property to a self-se- protection devices.)	ettled trust or similar device of	which you are a
	Yes. Fill in the details.	Description and value of the many	tuonofound	Data Tuessafan wa
	Name of trust	Description and value of the property	u ansierreu	Date Transfer was made

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Debtor 1 Jose F. Rojas-Alcocer Case number (if known)

Par	t 8:	List of Certain Financial Accounts, Inst	rum	ents, Safe Deposit	Boxes, and Sto	rage Units			
<u>?</u> 0.	solo Incl	hin 1 year before you filed for bankruptcy d, moved, or transferred? lude checking, savings, money market, or uses, pension funds, cooperatives, associ	othe	er financial accour	nts; certificates	of deposit;			
		No							
		Yes. Fill in the details.							
		me of Financial Institution and Idress (Number, Street, City, State and ZIP le)		t 4 digits of ount number	Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred		ast balance befor closing or transfe
21.		you now have, or did you have within 1 yo h, or other valuables?	ear b	efore you filed for	bankruptcy, an	y safe dep	osit box or other deposi	tory	for securities,
		No Yes. Fill in the details.							
		me of Financial Institution Idress (Number, Street, City, State and ZIP Code)		Who else had ac Address (Number, and ZIP Code)		Describe	the contents		Do you still have it?
22.	Hav	ve you stored property in a storage unit on	plac	ce other than your	home within 1 y	year before	you filed for bankruptc	у	
		Yes. Fill in the details.							
		me of Storage Facility Idress (Number, Street, City, State and ZIP Code)		Who else has or to it? Address (Number, and ZIP Code)		Describe	the contents		Do you still have it?
Dar	t 9:	Identify Property You Hold or Control f	or S	omeone Else					
	Do	you hold or control any property that son			ude any propert	y you borro	owed from, are storing fo	or, o	r hold in trust fo
	•	No Yes. Fill in the details.							
		vner's Name Idress (Number, Street, City, State and ZIP Code)		Where is the pro (Number, Street, City, Code)		Describe	the property		Valu
Par	t 10:	Give Details About Environmental Info	mat	ion					
		ourpose of Part 10, the following definition							
	toxi	vironmental law means any federal, state, ic substances, wastes, or material into the atrolling the cleanup of these substances,	air,	land, soil, surface		• .	•		
		e means any location, facility, or property n, operate, or utilize it, including disposal		-	environmental la	aw, whethe	r you now own, operate,	or u	ıtilize it or used t
		zardous material means anything an envir terial, pollutant, contaminant, or similar te		ental law defines a	as a hazardous v	waste, haza	ardous substance, toxic	sub	stance, hazardou
₹ер	ort a	III notices, releases, and proceedings that	you	know about, rega	rdless of when t	they occuri	red.		
24.	Has	any governmental unit notified you that	you i	may be liable or p	otentially liable	under or in	violation of an environr	nent	al law?
		No Yes. Fill in the details.							
		me of site Idress (Number, Street, City, State and ZIP Code)		Governmental un Address (Number,		_	onmental law, if you it		Date of notice

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De	btor 1	Jose F. Rojas-Alcocer		Cas	e number (if known)	
25.	_	you notified any governmental unit of	any release of hazardous material?			
		No Yes. Fill in the details.				
	Nam	ne of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice
26.	Have	you been a party in any judicial or adı	ministrative proceeding under any enviro	onme	ental law? Include settlements and	d orders.
		No				
		Yes. Fill in the details.				
		e Title	Court or agency	Nat	ure of the case	Status of the
	Cas	e Number	Name Address (Number, Street, City, State and ZIP Code)			case
Pai	rt 11:	Give Details About Your Business or	Connections to Any Business			
27.			tcy, did you own a business or have any	of th	ne following connections to any h	usiness?
		_ ` ` ` `	in a trade, profession, or other activity, e		·	domess.
		_	pany (LLC) or limited liability partnership		•	
		☐ A partner in a partnership	san, (220, or mined nability partitioning	, (• /	
		☐ An officer, director, or managing ex	acutive of a corporation			
		☐ An owner of at least 5% of the votin	·			
	_					
	_	No. None of the above applies. Go to I				
		Yes. Check all that apply above and fill iness Name	I in the details below for each business.		Employer Identification number	
	Add	ress	Describe the nature of the business		Employer Identification number Do not include Social Security r	
	(Num	ber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed	
28.		in 2 years before you filed for bankrup cutions, creditors, or other parties.	tcy, did you give a financial statement to	any	one about your business? Includ	e all financial
		No				
		Yes. Fill in the details below.				
	Nam	ne ress	Date Issued			
		ber, Street, City, State and ZIP Code)				
Pa	rt 12:	Sign Below				
true ban 18 U	and o krupto J.S.C.	correct. I understand that making a fals by case can result in fines up to \$250,0 §§ 152, 1341, 1519, and 3571.	nancial Affairs and any attachments, and e statement, concealing property, or obt 00, or imprisonment for up to 20 years, o	tainir	ng money or property by fraud in	
Jo	se F.	F. Rojas-Alcocer Rojas-Alcocer e of Debtor 1	Signature of Debtor 2			
Da	te _J	anuary 29, 2016	Date			
Did ■ N	-	ttach additional pages to Your Stateme	ent of Financial Affairs for Individuals Fili	ing f	or Bankruptcy (Official Form 107)	?
	es					
Did ■ N		ay or agree to pay someone who is no	t an attorney to help you fill out bankrup	tcy f	orms?	
-		ame of Person . Attach the <i>Bankru</i>	ptcy Petition Preparer's Notice, Declaration,	, and	Signature (Official Form 119).	
	ial Forr		ment of Financial Affairs for Individuals Filing			nage

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Fill in this inform	nation to identify your	case:		
Debtor 1	Jose F. Rojas-Al	cocer		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DIST	RICT OF ILLINOIS	
	, ,			
Case number (if known)				Check if this is an amended filing
Official Fo	rm 100			
		n for Indiv	iduals Filing Under Chapte	er 7 12/15
16	to the CP and the characters of the characters o		and all the formula Mr.	
	vidual filing under cha e claims secured by yo	• •	out this form it:	
_	sed personal property a		expired	
You must file this	s form with the court we ever is earlier, unless th	ithin 30 days after yo	ou file your bankruptcy petition or by the date set for cause. You must also send copies to the cr	
•	ople are filing together te the form.	in a joint case, both	are equally responsible for supplying correct infor	mation. Both debtors must sign
Be as complete a	and accurate as possib	le. If more space is n	eeded, attach a separate sheet to this form. On the	top of any additional pages,
write yo	our name and case nur	nber (if known).		
Part 1: List Yo	our Creditors Who Hav	e Secured Claims		
1. For any creditorinformation be		art 1 of Schedule D: 0	Creditors Who Have Claims Secured by Property (C	fficial Form 106D), fill in the
	editor and the property t	hat is collateral	What do you intend to do with the property that	Did you claim the property
			secures a debt?	as exempt on Schedule C?
Creditor's			☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	
			☐ Retain the property and enter into a <i>Reaffirmation</i>	☐ Yes
Description of			Agreement.	
property securing debt:			Retain the property and [explain]:	
				-
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	
Description of			Retain the property and enter into a <i>Reaffirmation</i>	☐ Yes
property			Agreement. ☐ Retain the property and [explain]:	
securing debt:			Tretain the property and [explain].	-
Creditor's			Surronder the property	□ No
name:			☐ Surrender the property. ☐ Retain the property and redeem it.	□ NU
namo.			Retain the property and redeem it. Retain the property and enter into a <i>Reaffirmation</i>	☐ Yes
Description of			Agreement.	-
property			☐ Retain the property and [explain]:	
securing debt:				-
Creditor's			☐ Surrender the property.	□ No
50 0			Carronaci inc property.	 110

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	Jose F. Rojas-Alcocer	Case number (if known)	
name:		☐ Retain the property and redeem it.	☐ Yes
Descri	ption of	☐ Retain the property and enter into a <i>Reaffirmation</i> Agreement.	
propert	ty	Retain the property and [explain]:	
securir	ng debt:		_
or any u ne inform nay assu	nation below. Do not list real estate leases. me an unexpired personal property lease if	ases listed in Schedule G: Executory Contracts and Unexpired Unexpired leases are leases that are still in effect; the leas the trustee does not assume it. 11 U.S.C. § 365(p)(2).	e period has not yet ended. You
Describe	your unexpired personal property leases		Will the lease be assumed?
_essor's r	name:		□ No
	on of leased		
Property:			☐ Yes
_essor's r	name:		□ No
	on of leased		
Property:			☐ Yes
essor's r	name:		□ No
	on of leased		
Property:			☐ Yes
_essor's r			□ No
	on of leased		_
Property:			Yes
_essor's r	name:		□ No
	on of leased		
Property:			☐ Yes
essor's r			□ No
Descriptio Property:	on of leased		□ Vee
roporty.			☐ Yes
essor's r			□ No
Property:	on of leased		☐ Yes
Part 3:	Sign Below		
	nalty of perjury, I declare that I have indicat that is subject to an unexpired lease.	ed my intention about any property of my estate that secu	res a debt and any personal
(/s/ .	Jose F. Rojas-Alcocer	X	
	se F. Rojas-Alcocer	XSignature of Debtor 2	
	nature of Debtor 1	-	
Date	January 29, 2016	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapt	er 7:	Liquidation	
	\$245	filing fee	
	\$75	administrative fee	
+	\$15	trustee surcharge	
	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-02953 Doc 1 Filed 01/31/16 Entered 01/31/16 10:40:45 Desc Main Document Page 48 of 53

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Jose F. Rojas-Alcocer		Case No	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR D	EBTOR(S)
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fil per rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankrupto	cy, or agreed to be p	aid to me, for services rendered or to
	For legal services, I have agreed to accept		\$	950.00
	Prior to the filing of this statement I have received			950.00
	Balance Due		\$	0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed comfirm.	pensation with any other perso	n unless they are m	embers and associates of my law
	☐ I have agreed to share the above-disclosed compen- copy of the agreement, together with a list of the na			
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspe	ects of the bankrupto	ey case, including:
l o	a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, sta c. Representation of the debtor at the meeting of credi d. [Other provisions as needed] Negotiations with secured creditors to	atement of affairs and plan whiters and confirmation hearing, reduce to market value; e	ch may be required and any adjourned exemption planni	nearings thereof;
	reaffirmation agreements and applicati 522(f)(2)(A) for avoidance of liens on h		on and filing of m	otions pursuant to 11 USC
6.	By agreement with the debtor(s), the above-disclosed f Representation of the debtors in any d or any other adversary proceeding.	ee does not include the following ischargeability actions, ju	ng service: dicial lien avoida	nces, relief from stay actions
		CERTIFICATION		
	certify that the foregoing is a complete statement of a ankruptcy proceeding.	ny agreement or arrangement f	or payment to me for	r representation of the debtor(s) in
J	anuary 29, 2016	/s/ Joseph P. Do	vle	
	ate	Joseph P. Doyle	6277393	
		Signature of Attorn Law Office of J o	ney Oseph P. Doyle Ll	.C
		105 S. Roselle R	load, Suite 203	
		Schaumburg, IL 847-985-1100 F	. 60193 'ax: 847-985-1126	
		joe@fightbills.c		
		Name of law firm		

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BANKRUPTCY CONTRACT

(Effective Aug. 1, 2015)

SECURED DEBTS Mortgage Arreads Mortgage Balance Car Balance Car #2 Balance Loans	UNSECURED DEBTS	NON-DISCHARGEABLE Tax Student Loans Gov't. Fines Child Support ←? →
FOTAL	TOTAL	TOTAL'S
SECURED'S	UNSECURED'S	NON-DISCH. \$

Chapter 7 - eliminates dischargeable unsecured debts. Certain debts may not be dischargeable.

			- A A	
1) Today you paid us \$	s s	as your retainer on our total att	omevsfee of s	(0) 1) You agree to pay
				Open Control of the C
your balance or 5	In fou	r (4) installments of	before	
2) Todayoyo u paid us \$		as your retainer on our total att		
THE COMMENT WAS A PROPERTY OF			orneys ree or 5	You agree to pay
Carried to the control of	more prior to your case	Defing filed:		

Client agrees that \$335.00 filing fee is a separate cost and is not included in the agreed legal fee. Client agrees that the \$40.00 fee for the credit report (per person) is a separate cost and is not included in the agreed legal fee. Client agrees that 1) TIMELY PAYMENT - Client will pay in full prior to the last payment date; 2) REFUNDS - If client decides to discontinue legal services at any time, client is only entitled to a refund or unearned fees. Firm will take about 30 days to do an accounting and issue a refund check. Firm's hourly rate is \$250 per hour for purposes of determining what refund client is entitled to in the event that client discharges Firm as client's attorney. In order to discharge Firm, client must submit a written request. 3) COLLECTIONS - Client agrees that if Firm is unable to collect its fees through the terms stated in this contract, Firm will be forced to refer your account to collections. Client is liable for all attorney's fees and costs incurred to collect the debt, including court costs, which will amount to no less than \$400.00. 4) LAW CHANGES - Firm's advice to client is subject to changes in applicable State and Federal laws. Client agrees to hold Firm harmless for damages related to changes in the law that affect client's ability to qualify for bankruptcy relief or to discharge debts within a bankruptcy case. The law may change any day and Firm is not responsible for any delay. Pay in full immediately so Firm can get client's case filed or risk that changes in laws or court decisions will change the advice we give client. 5) RESCISSIONS - Once client reaffirms a debt, client may only rescind the reaffirmation agreement by sending a written request, certified mail, return receipt requested, to Firm no less than two weeks prior to the bar date for rescissions. 6) STATE LAW PROCEEDINGS - Client has been advised by Firm that Firm will not represent client in ANY state law matter, including, but not limited to, divorce proceedings, civil lawsuits, or contempt proceedings. Client is hereby advised to appear at any and all state court proceedings, unless specifically advised otherwise in writing. 7) ADDITIONAL FEES - Client will be charged, and agrees to pay, additional fees for a) Failing to list debts by the time of filing that later have to be added to client's bankruptcy documents. The court charges \$30 to amend a petition. b) Missing court date. Client must attend a meeting of creditors approximately four weeks after client's case is filed. Firm still has to appear even if client does not, so Firm charges \$150 additional fee for any missed court date. Client agrees to call Firm three weeks after client's case has been filed to obtain the section 341 meeting date if client has not received notice of the meeting. c) Adversary objections to discharge based on fraudulent use on credit cards or other discharge issues. Firm's fee for negotiating a settlement is approximately \$300 to be paid in advance of settlement. Firm's fee for litigating a discharge issue is \$200 per hour, ten hours to be paid in advance. d) Delays - If client delays in paying the fees, returning the petition or in providing information to Firm, including appraisals, titles, bank account information. Firm reserves the right to charge additional fees which will amount to no less than \$100. e) Lien avoidance - Client agrees that the above quote fee does not include services provided to avoid judgment liens (\$250) ___, non-purchase money security interests (\$200) , or redemptions on vehicles (\$650) ___ to be paid prior to Firm drafting the motion. Client understands and agrees that if client does not pay the fee the firm will not bring the motion and the lien will survive the bankruptcy. f) Bounced checks - Client agrees to pay a \$25 bounced check fee for any checks not honored by client's bank. 8) FULL DISCLOSURE -Client agrees to fully disclose all financial information to Firm. Client agrees to disclose all of assets and debts and understands that it is a Federal crime to omit a creditor or other information from a bankruptcy petition.

No part of this contract is meant to conflict with any part of the Court-Approved Retention Agreement, revised as of March 15, 2011, by the United States Bankruptcy Court for the Northern District of Illinois, and in any real or perceived conflict, the Provision of the Court-Approved Retention Agreement prevails.

DATE 2/21/16 RECORD #______X

United States Bankruptcy Court Northern District of Illinois

		Not then District of Hillions		
In re	Jose F. Rojas-Alcocer		Case No.	
		Debtor(s)	Chapter	7
	VE	RIFICATION OF CREDITOR MA	ATRIX	
		Number of C	Creditors: _	23
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditor	rs is true and	correct to the best of my
Date:	January 29, 2016	/s/ Jose F. Rojas-Alcocer Jose F. Rojas-Alcocer Signature of Debtor		

ABBHH Out-Patient Group 1786 Moon Lake Blvd Hoffman Estates, IL 60169

Advanced Psych Services PO Box 5800 River Forest, IL 60305-5800

Alexian Brothers Behavioral Health 21272 Network Place Chicago, IL 60673

Alliance Laboratory Physicians PO Box 5968 Carol Stream, IL 60197

Allied Interstate, LLC 7525 W. Campus Rd. New Albany, OH 43054

Arlington Ridge Pathology, S.C. 520 East 22nd Street Lombard, IL 60148

Associates In Psychiatry Counseling 2050 Lakin Ave 202 Elgin, IL 60123

CEP America-Illinois PO Box 582663 Modesto, CA 95358

Chase Card Po Box 15298 Wilmington, DE 19850

Diversified Collection Services 333 N Canyons Parkway Suite 100 Livermore, CA 94551

Gc Services 6330 Gulfton Houston, TX 77081 Health PCP Inc 18440 Thompson Ct # 105 Tinley Park, IL 60477

Hospital Med Consult PO box 967 Tinley Park, IL 60477-0967

Medical Recovery Specialists 2250 E Devon Ave Suite 352 Des Plaines, IL 60018

Midwest Emergency Associates 3429 Regal Drive Alcoa, TN 37701-3265

Mrsi 2250 E Devon Ave Ste 352 Des Plaines, IL 60018

NCI 3601 Algonquin Road Suite 232 Rolling Meadows, IL 60008

Northwest Collectors 3601 Algonquin Rd Suite 500 Rolling Meadows, IL 60008-3146

Northwest Community Hospital 25709 Network Pl. Chicago, IL 60673

Northwest Radiology Associates, SC Attn: Bankruptcy Dept. 520 E. 22nd St. Lombard, IL 60148

Paypal Credit PO Box 5138 Timonium, MD 21094

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Sprint/Bankruptcy PO Box 7949 Overland Park, KS 66207-0949

Village of Hanover Park PO Box 457 Wheeling, IL 60090